



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

Georgia Medicaid

CAHPS® 5.0 Adult Medicaid Summary Report

July 2015



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Introduction. The CAHPS® 5.0H Survey of the adult members of the Georgia Medicaid (GA-ADMD) is a comprehensive tool for assessing consumers' experiences with the Medicaid program. This report is designed to allow the Medicaid program to look at summaries of members' experiences, using two types of presentation. First, this executive summary presents a brief description of the survey methodology, a graphic presentation of key results for rating questions, composites and Effectiveness of Care Measures followed by a sample disposition. Second, member responses are presented by question, including information about the response options used for scoring achievements. A copy of the questionnaire is found as an appendix.

Assessing consumers' experience in this report is accomplished with the use of achievement scores and composite scores. Member responses to survey questions are summarized as achievement scores. Responses indicating a positive experience are labeled as achievements, and an achievement score is computed equal to the proportion of responses qualifying as achievements. The lower the achievement score, the greater the need for the Medicaid program to improve. Composite scores are built from achievements for groups of survey items that make up broad domains of members' experience: Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, Customer Service, and Shared Decision Making.

Results. This report summarizes the findings of the adult Medicaid 5.0H CAHPS survey conducted for GA-ADMD. Attempts were made to survey 1350 member households by mail and telephone during the period March 17, 2015 through May 1, 2015, using a mixed-mode procedure and standard questionnaire. The survey procedure and questionnaire were developed jointly by the Agency for Healthcare Research and Quality (AHRQ) and the National Committee for Quality Assurance (NCQA).

The survey drew as potential respondents the adult members of GA-ADMD who were continuously enrolled in the Medicaid program for at least 6 months as of December 31, 2014, with no more than one enrollment gap of 45 days or less. From this sample frame, a random sample of 1350 cases was drawn. The survey was offered in English and Spanish.

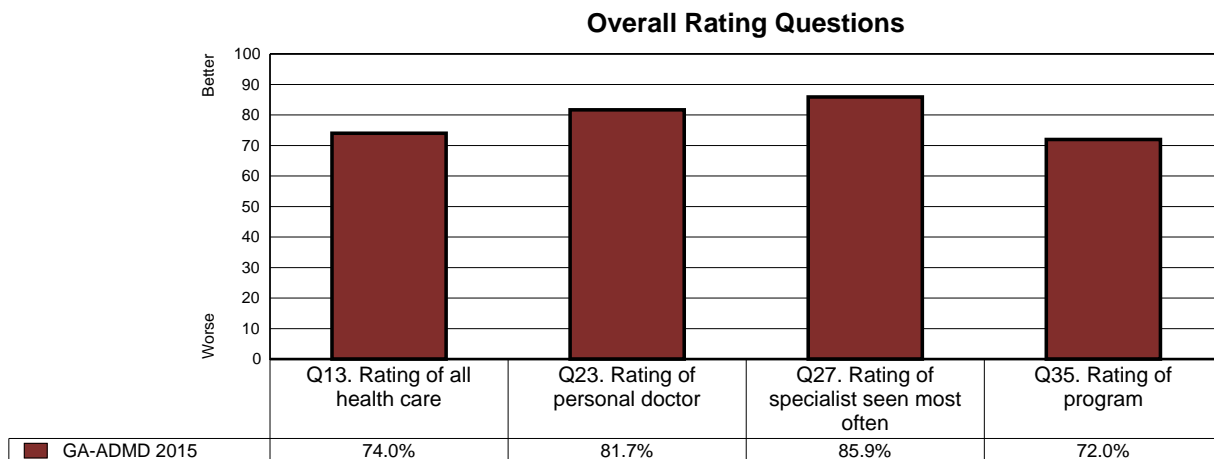
Questionnaires were considered complete if respondents did not answer 'No' to Q1 and provided a valid response to at least one item in the questionnaire. Complete interviews were obtained from 465 GA-ADMD members, and the response rate was 37.1%.

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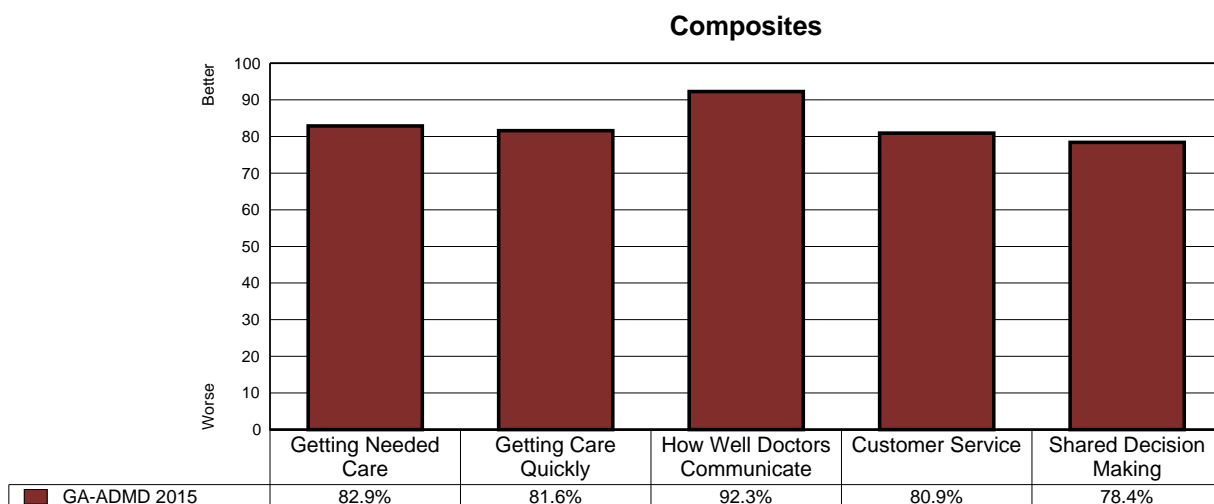
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SUMMARY OF OVERALL RATING QUESTIONS

Four rating questions assess overall consumer satisfaction with health care, personal doctor, specialist seen most often, and program. Response options for overall rating questions range from 0 (worst) to 10 (best). In the table below, ratings of 8, 9, or 10 are considered achievements, and the achievement score is presented as the proportion of members whose response was an achievement.



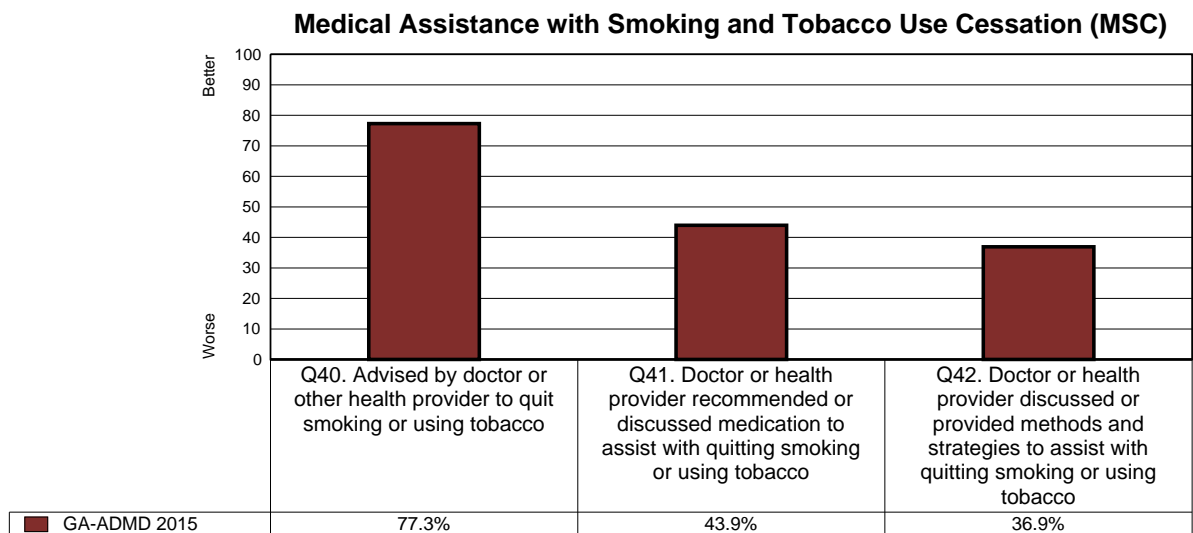
SUMMARY OF COMPOSITES A composite score is calculated for each of five domains of member experience: Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, Customer Service, and Shared Decision Making. The composite scores provide a summary assessment of how the plan performed across the domain. In the table below, proportions of positive responses are reported as achievement scores. Responses of "Yes" are considered achievements for the Shared Decision Making composite. For all other composites, responses of "Usually" or "Always" are considered achievements.



SUMMARY OF EFFECTIVENESS OF CARE MEASURES

Three Effectiveness of Care Measures are presented below. Two of the measures, Aspirin Use and Discussion and Medical Assistance with Smoking and Tobacco Use Cessation, typically use a rolling-average methodology, where scores are computed using two years of response data. For the purpose of this report, these measures are presented as single-year scores, rather than rolling averages.

The Medical Assistance with Smoking Cessation and Tobacco Use Cessation measure is composed of three questions. Scores represent the proportion of adult members whose provider advised them to (1) quit smoking or using tobacco; (2) recommended or discussed medication to assist with quitting smoking or using tobacco; or (3) discussed or provided methods and strategies other than medication to assist with quitting smoking or using tobacco. For each question, a response of "Sometimes", "Usually", or "Always" is considered an achievement.



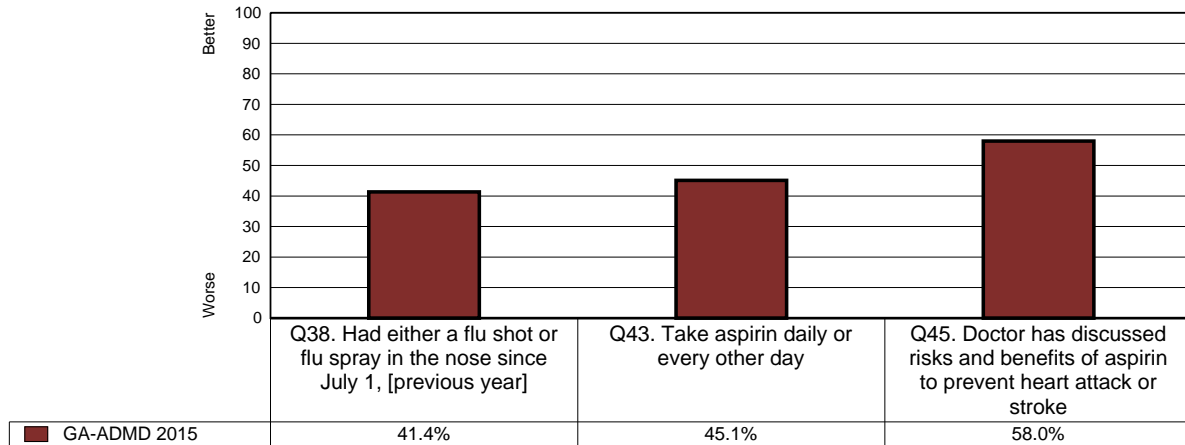
The Flu Vaccinations for Adults Ages 18-64 measure is based on a single question about getting a flu shot or flu spray. The score represents the proportion of members aged 18-64 who received an influenza vaccination since July 1 of the measurement year.

The Aspirin Use and Discussion measure assesses different facets of aspirin use in the primary prevention of cardiovascular disease. The measure is based on two questions, one assessing current aspirin use, and the other asking whether a health provider discussed the risks and benefits of taking aspirin to prevent heart attack or stroke.

The Aspirin Use component includes members in certain risk factor categories who could safely take aspirin (based on the response to Q44), had no cardiovascular disease exclusion (based on the response to Q47), and who answered Q43. The rate represents the proportion of these members who indicated they take aspirin daily or every other day.

The Discussing Aspirin Risks and Benefits component includes members in certain age/gender categories who had no cardiovascular disease exclusion (based on the response to Q47), and who answered Q45. The rate represents the proportion of these members who indicated that a health provider had discussed the risks and benefits of aspirin with them.

Flu Shot for Adults Ages 18-64 (FSA) / Aspirin Use and Discussion (ASP)



Sample Disposition

	GA-ADMD 2015
First mailing - sent	1350
*First mailing - usable survey returned	245
Second mailing - sent	1051
*Second mailing - usable survey returned	130
*Phone - usable surveys	90
Total - usable surveys	465
†Ineligible: According to population criteria‡	27
†Ineligible: Language barrier	11
†Ineligible: Deceased	2
†Ineligible: Mentally or physically unable to complete survey	3
Bad phone number OR bad address	113
Refusal	55
Nonresponse - Unavailable by mail AND phone	674
Adjusted Response Rate	35.6%

*Included in response rate numerator

†Excluded from adjusted response rate denominator

‡Population criteria: The designated respondent must be enrolled in the health plan and meet the age requirements of the survey methodology.

Note: *Adjusted Response Rate = Total Usable Surveys / Total Eligible Cases*

Responses by Question

Q1. Our records show that you are now in Georgia Medicaid. Is that right?

	GA-ADMD 2015	
	N	%
Yes	444	100.0%
No	0	0.0%
Total	444	100.0%
Not Answered	21	

Your Health Care in the Last 6 Months

Q3. In the last 6 months, did you have an illness, injury or condition that needed care right away in a clinic, emergency room or doctor's office?

	GA-ADMD 2015	
	N	%
Yes	215	47.3%
No	240	52.7%
Total	455	100.0%
Not Answered	10	

Q4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Never	4	2.1%
<input type="radio"/> Sometimes	23	12.2%
<input checked="" type="radio"/> Usually	28	14.8%
<input checked="" type="radio"/> Always	134	70.9%
Total	189	100.0%
Not Answered	26	
Reporting Category	Getting Care Quickly	
Achievement Score	85.7%	

Q5. In the last 6 months, did you make any appointments for a check-up or routine care at a doctor's office or clinic?

	GA-ADMD 2015	
	N	%
Yes	341	75.4%
No	111	24.6%
Total	452	100.0%
Not Answered	13	

Response scored as: Achievement Room for improvement

Responses by Question

Your Health Care in the Last 6 Months (continued)

- Q6.** In the last 6 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Never	6	2.0%
<input type="radio"/> Sometimes	53	17.6%
<input type="radio"/> Usually	52	17.3%
<input type="radio"/> Always	190	63.1%
Total	301	100.0%
Not Answered	40	
Reporting Category	Getting Care Quickly	
Achievement Score	80.4%	

- Q7.** In the last 6 months, not counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

	GA-ADMD 2015	
	N	%
None	76	17.2%
1 time	65	14.7%
2	90	20.4%
3	62	14.0%
4	33	7.5%
5 to 9	87	19.7%
10 or more times	29	6.6%
Total	442	100.0%
Not Answered	23	

- Q8.** In the last 6 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Yes	243	71.7%
<input type="radio"/> No	96	28.3%
Total	339	100.0%
Not Answered	27	
Reporting Category	Single Items	
Achievement Score	71.7%	

Response scored as: Achievement Room for improvement

Responses by Question

Your Health Care in the Last 6 Months (continued)

- Q9.** In the last 6 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

	GA-ADMD 2015	
	N	%
Yes	161	46.9%
No	182	53.1%
Total	343	100.0%
Not Answered	23	

- Q10.** Did a doctor or other health provider talk about the reasons you might want to take a medicine?

	GA-ADMD 2015	
	N	%
<input checked="" type="radio"/> Yes	145	92.4%
<input type="radio"/> No	12	7.6%
Total	157	100.0%
Not Answered	4	
Reporting Category	Shared Decision Making	
Achievement Score	92.4%	

- Q11.** Did a doctor or other health provider talk about the reasons you might not want to take a medicine?

	GA-ADMD 2015	
	N	%
<input checked="" type="radio"/> Yes	105	67.3%
<input type="radio"/> No	51	32.7%
Total	156	100.0%
Not Answered	5	
Reporting Category	Shared Decision Making	
Achievement Score	67.3%	

- Q12.** When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?

	GA-ADMD 2015	
	N	%
<input checked="" type="radio"/> Yes	116	74.8%
<input type="radio"/> No	39	25.2%
Total	155	100.0%
Not Answered	6	
Reporting Category	Shared Decision Making	
Achievement Score	74.8%	

Response scored as: Achievement Room for improvement

Responses by Question

Your Health Care in the Last 6 Months (continued)

Q13. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

	GA-ADMD 2015	
	N	%
● Worst health care possible	2	0.6%
● 1	1	0.3%
● 2	5	1.5%
● 3	10	2.9%
● 4	5	1.5%
● 5	17	5.0%
● 6	15	4.4%
● 7	34	9.9%
● 8	65	19.0%
● 9	49	14.3%
● Best health care possible	139	40.6%
Total	342	100.0%
Not Answered	24	
Reporting Category	Ratings	
Rating (8, 9 and 10)	74.0%	

Q14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?

	GA-ADMD 2015	
	N	%
● Never	10	2.9%
● Sometimes	44	12.8%
● Usually	70	20.3%
● Always	220	64.0%
Total	344	100.0%
Not Answered	22	
Reporting Category	Getting Needed Care	
Achievement Score	84.3%	

Your Personal Doctor

Q15. A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

	GA-ADMD 2015	
	N	%
Yes	372	82.9%
No	77	17.1%
Total	449	100.0%
Not Answered	16	

○ **Response scored as:** ● Achievement ● Room for improvement

Responses by Question

Your Personal Doctor (continued)

Q16. In the last 6 months, how many times did you visit your personal doctor to get care for yourself?

	GA-ADMD 2015	
	N	%
None	36	10.6%
1 time	58	17.1%
2	90	26.5%
3	64	18.9%
4	26	7.7%
5 to 9	52	15.3%
10 or more times	13	3.8%
Total	339	100.0%
Not Answered	33	

Q17. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Never	5	1.7%
<input type="radio"/> Sometimes	15	5.1%
<input checked="" type="radio"/> Usually	53	18.0%
<input checked="" type="radio"/> Always	222	75.3%
Total	295	100.0%
Not Answered	8	
Reporting Category	Communication	
Achievement Score	93.2%	

Q18. In the last 6 months, how often did your personal doctor listen carefully to you?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Never	5	1.7%
<input type="radio"/> Sometimes	19	6.4%
<input checked="" type="radio"/> Usually	51	17.2%
<input checked="" type="radio"/> Always	221	74.7%
Total	296	100.0%
Not Answered	7	
Reporting Category	Communication	
Achievement Score	91.9%	

Response scored as: Achievement Room for improvement

Responses by Question

Your Personal Doctor (continued)

Q19. In the last 6 months, how often did your personal doctor show respect for what you had to say?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Never	6	2.0%
<input type="radio"/> Sometimes	14	4.7%
<input type="radio"/> Usually	38	12.8%
<input type="radio"/> Always	238	80.4%
Total	296	100.0%
Not Answered	7	
Reporting Category	Communication	
Achievement Score	93.2%	

Q20. In the last 6 months, how often did your personal doctor spend enough time with you?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Never	12	4.1%
<input type="radio"/> Sometimes	15	5.1%
<input type="radio"/> Usually	62	21.2%
<input type="radio"/> Always	203	69.5%
Total	292	100.0%
Not Answered	11	
Reporting Category	Communication	
Achievement Score	90.8%	

Q21. In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

	GA-ADMD 2015	
	N	%
Yes	178	60.8%
No	115	39.2%
Total	293	100.0%
Not Answered	10	

Response scored as: Achievement Room for improvement

Responses by Question

Your Personal Doctor (continued)

Q22. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

	GA-ADMD 2015	
	N	%
● Never	15	8.6%
● Sometimes	19	10.9%
● Usually	40	23.0%
● Always	100	57.5%
Total	174	100.0%
Not Answered	4	
Reporting Category	Single Items	
Achievement Score	80.5%	

Q23. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

	GA-ADMD 2015	
	N	%
● Worst personal doctor possible	2	0.6%
● 1	3	0.9%
● 2	1	0.3%
● 3	9	2.7%
● 4	8	2.4%
● 5	4	1.2%
● 6	6	1.8%
● 7	28	8.4%
● 8	36	10.8%
● 9	60	18.0%
● Best personal doctor possible	176	52.9%
Total	333	100.0%
Not Answered	39	
Reporting Category	Ratings	
Rating (8, 9 and 10)	81.7%	

Getting Health Care From Specialists

Q24. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you make any appointments to see a specialist?

	GA-ADMD 2015	
	N	%
Yes	226	50.7%
No	220	49.3%
Total	446	100.0%
Not Answered	19	

○ **Response scored as:** ● Achievement ● Room for improvement

Responses by Question

Getting Health Care From Specialists (continued)

Q25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?

	GA-ADMD 2015	
	N	%
● Never	7	3.3%
● Sometimes	35	16.4%
● Usually	54	25.2%
● Always	118	55.1%
Total	214	100.0%
Not Answered	12	
Reporting Category	Getting Needed Care	
Achievement Score	80.4%	

Q26. How many specialists have you seen in the last 6 months?

	GA-ADMD 2015	
	N	%
None	6	2.9%
1 specialist	77	37.2%
2	60	29.0%
3	38	18.4%
4	14	6.8%
5 or more specialists	12	5.8%
Total	207	100.0%
Not Answered	19	

Q27. We want to know your rating of the specialist you saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

	GA-ADMD 2015	
	N	%
● Worst specialist possible	1	0.5%
● 1	0	0.0%
● 2	2	1.0%
● 3	2	1.0%
● 4	2	1.0%
● 5	5	2.5%
● 6	8	4.0%
● 7	8	4.0%
● 8	22	11.1%
● 9	26	13.1%
● Best specialist possible	122	61.6%
Total	198	100.0%
Not Answered	3	
Reporting Category	Ratings	
Rating (8, 9 and 10)	85.9%	

○ **Response scored as:** ● Achievement ● Room for improvement

Responses by Question

Your Health Plan

Q28. In the last 6 months, did you look for any information in written materials or on the Internet about how your health plan works?

	GA-ADMD 2015	
	N	%
Yes	90	20.5%
No	349	79.5%
Total	439	100.0%
Not Answered	26	

Q29. In the last 6 months, how often did the written materials or the Internet provide the information you needed about how your health plan works?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Never	5	5.7%
<input type="radio"/> Sometimes	24	27.6%
<input type="radio"/> Usually	25	28.7%
<input type="radio"/> Always	33	37.9%
Total	87	100.0%
Not Answered	3	
Reporting Category	Single Items	
Achievement Score	66.7%	

Q30. In the last 6 months, did you get information or help from your health plan's customer service?

	GA-ADMD 2015	
	N	%
Yes	118	27.2%
No	316	72.8%
Total	434	100.0%
Not Answered	31	

Q31. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Never	9	8.5%
<input type="radio"/> Sometimes	23	21.7%
<input type="radio"/> Usually	19	17.9%
<input type="radio"/> Always	55	51.9%
Total	106	100.0%
Not Answered	12	
Reporting Category	Customer Service	
Achievement Score	69.8%	

Response scored as: Achievement Room for improvement

Responses by Question

Your Health Plan (continued)

Q32. In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

	GA-ADMD 2015	
	N	%
● Never	3	2.8%
● Sometimes	7	6.5%
● Usually	17	15.7%
● Always	81	75.0%
Total	108	100.0%
Not Answered	10	
Reporting Category	Customer Service	
Achievement Score	90.7%	

Q33. In the last 6 months, did your health plan give you any forms to fill out?

	GA-ADMD 2015	
	N	%
Yes	103	23.6%
No	334	76.4%
Total	437	100.0%
Not Answered	28	

PQ34. In the last 6 months, how often were the forms from your health plan easy to fill out? [NOTE: Response of 'Always' padded with Q33 = 'No', based on NCQA scoring guidelines.]

	GA-ADMD 2015	
	N	%
● Never	6	1.4%
● Sometimes	18	4.2%
● Usually	26	6.1%
● Always	378	88.3%
Total	428	100.0%
Not Answered	9	
Reporting Category	Single Items	
Achievement Score	94.4%	

○ **Response scored as:** ● Achievement ● Room for improvement

Responses by Question

Your Health Plan (continued)

Q35. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

	GA-ADMD 2015	
	N	%
● Worst health plan possible	9	2.1%
● 1	4	0.9%
● 2	4	0.9%
● 3	8	1.9%
● 4	17	4.0%
● 5	28	6.5%
● 6	20	4.7%
● 7	30	7.0%
● 8	73	17.1%
● 9	68	15.9%
● Best health plan possible	167	39.0%
Total	428	100.0%
Not Answered	37	
Reporting Category	Ratings	
Rating (8, 9 and 10)	72.0%	

About You

Q36. In general, how would you rate your overall health?

	GA-ADMD 2015	
	N	%
● Excellent	32	7.2%
● Very Good	58	13.1%
● Good	140	31.6%
● Fair	156	35.2%
● Poor	57	12.9%
Total	443	100.0%
Not Answered	22	
Reporting Category	Single Items	
Achievement Score	20.3%	

○ **Response scored as:** ● Achievement ● Room for improvement

Responses by Question

About You (continued)

Q37. In general, how would you rate your overall mental or emotional health?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Excellent	65	14.7%
<input type="radio"/> Very Good	85	19.2%
<input type="radio"/> Good	138	31.2%
<input type="radio"/> Fair	117	26.4%
<input type="radio"/> Poor	38	8.6%
Total	443	100.0%
Not Answered	22	
Reporting Category	Single Items	
Achievement Score	33.9%	

Q38. Have you had either a flu shot or flu spray in the nose since July 1, [previous year]?

	GA-ADMD 2015	
	N	%
<input type="radio"/> Yes	110	41.4%
<input type="radio"/> No	156	58.6%
Don't Know	8	
Total	266	100.0%
Not Answered	3	
Reporting Category	Flu Shot for Adults	
Achievement Score	41.4%	

Q39. Do you now smoke cigarettes or use tobacco every day, some days or not at all?

	GA-ADMD 2015	
	N	%
Every day	77	17.4%
Some days	56	12.6%
Not at all	310	70.0%
Don't Know	2	
Total	443	100.0%
Not Answered	20	

Response scored as: Achievement Room for improvement

Responses by Question

About You (continued)

Q40. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

	GA-ADMD 2015	
	N	%
<input checked="" type="radio"/> Never	30	22.7%
<input checked="" type="radio"/> Sometimes	27	20.5%
<input checked="" type="radio"/> Usually	18	13.6%
<input checked="" type="radio"/> Always	57	43.2%
Total	132	100.0%
Not Answered	1	
Reporting Category	Medical Assistance with Smoking Cessation	
Achievement Score	77.3%	

Q41. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.

	GA-ADMD 2015	
	N	%
<input checked="" type="radio"/> Never	74	56.1%
<input checked="" type="radio"/> Sometimes	27	20.5%
<input checked="" type="radio"/> Usually	10	7.6%
<input checked="" type="radio"/> Always	21	15.9%
Total	132	100.0%
Not Answered	1	
Reporting Category	Medical Assistance with Smoking Cessation	
Achievement Score	43.9%	

Q42. In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.

	GA-ADMD 2015	
	N	%
<input checked="" type="radio"/> Never	82	63.1%
<input checked="" type="radio"/> Sometimes	19	14.6%
<input checked="" type="radio"/> Usually	12	9.2%
<input checked="" type="radio"/> Always	17	13.1%
Total	130	100.0%
Not Answered	3	
Reporting Category	Medical Assistance with Smoking Cessation	
Achievement Score	36.9%	

Response scored as: Achievement Room for improvement

Responses by Question

About You (continued)

Q43. Do you take aspirin daily or every other day? [NOTE: Data presented for eligible respondents determined by NCQA scoring guidelines.]

	GA-ADMD 2015	
	N	%
<input type="radio"/> Yes	23	45.1%
<input type="radio"/> No	28	54.9%
Don't know	0	0.0%
Total	51	100.0%
Not Answered	0	
Reporting Category	Aspirin Use and Discussion	
Achievement Score	45.1%	

Q44. Do you have a health problem or take medication that makes taking aspirin unsafe for you?

	GA-ADMD 2015	
	N	%
Yes	67	16.8%
No	331	83.2%
Don't know	45	
Total	398	100.0%
Not Answered	22	

Q45. Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke? [NOTE: Data presented for eligible respondents determined by NCQA scoring guidelines.]

	GA-ADMD 2015	
	N	%
<input type="radio"/> Yes	69	58.0%
<input type="radio"/> No	50	42.0%
Total	119	100.0%
Not Answered	0	
Reporting Category	Aspirin Use and Discussion	
Achievement Score	58.0%	

Q46.1. Are you aware that you have any of the following conditions? Response: High cholesterol

	GA-ADMD 2015	
	N	%
Yes	147	51.0%
No	141	49.0%
Total	288	100.0%
Not Answered	177	

Response scored as: Achievement Room for improvement

Responses by Question

About You (continued)

Q46.2. Are you aware that you have any of the following conditions? Response: High blood pressure

	GA-ADMD 2015	
	N	%
Yes	241	83.7%
No	47	16.3%
Total	288	100.0%
Not Answered	177	

Q46.3. Are you aware that you have any of the following conditions? Response: Parent or sibling with heart attack before the age of 60

	GA-ADMD 2015	
	N	%
Yes	77	26.7%
No	211	73.3%
Total	288	100.0%
Not Answered	177	

Q47.1. Has a doctor ever told you that you have any of the following conditions? Response: A heart attack

	GA-ADMD 2015	
	N	%
Yes	42	23.5%
No	137	76.5%
Total	179	100.0%
Not Answered	286	

Q47.2. Has a doctor ever told you that you have any of the following conditions? Response: Angina or coronary heart disease

	GA-ADMD 2015	
	N	%
Yes	39	21.8%
No	140	78.2%
Total	179	100.0%
Not Answered	286	

Q47.3. Has a doctor ever told you that you have any of the following conditions? Response: A stroke

	GA-ADMD 2015	
	N	%
Yes	39	21.8%
No	140	78.2%
Total	179	100.0%
Not Answered	286	

Responses by Question

About You (continued)

Q47.4. Has a doctor ever told you that you have any of the following conditions? Response: Any kind of diabetes or high blood sugar

	GA-ADMD 2015	
	N	%
Yes	132	73.7%
No	47	26.3%
Total	179	100.0%
Not Answered	286	

Q48. In the last 6 months, did you get health care 3 or more times for the same condition or problem?

	GA-ADMD 2015	
	N	%
Yes	178	41.3%
No	253	58.7%
Total	431	100.0%
Not Answered	34	

Q49. Is this a condition or problem that has lasted for at least 3 months? Do not include pregnancy or menopause.

	GA-ADMD 2015	
	N	%
Yes	132	80.0%
No	33	20.0%
Total	165	100.0%
Not Answered	13	

Q50. Do you now need or take medicine prescribed by a doctor? Do not include birth control.

	GA-ADMD 2015	
	N	%
Yes	343	79.6%
No	88	20.4%
Total	431	100.0%
Not Answered	34	

Q51. Is this medicine to treat a condition that has lasted for at least 3 months? Do not include pregnancy or menopause.

	GA-ADMD 2015	
	N	%
Yes	308	94.5%
No	18	5.5%
Total	326	100.0%
Not Answered	17	

Responses by Question

About You (continued)

Q52. What is your age?

	GA-ADMD 2015	
	N	%
18 to 24	26	5.9%
25 to 34	45	10.3%
35 to 44	42	9.6%
45 to 54	70	15.9%
55 to 64	94	21.4%
65 to 74	83	18.9%
75 or older	79	18.0%
Total	439	100.0%
Not Answered	26	

Q53. Are you male or female?

	GA-ADMD 2015	
	N	%
Male	151	33.9%
Female	294	66.1%
Total	445	100.0%
Not Answered	20	

Q54. What is the highest grade or level of school that you have completed?

	GA-ADMD 2015	
	N	%
8th grade or less	66	15.1%
Some high school but did not graduate	108	24.7%
High school graduate or GED	162	37.0%
Some college or 2-year degree	82	18.7%
4-year college graduate	14	3.2%
More than 4-year college degree	6	1.4%
Total	438	100.0%
Not Answered	27	

Q55. Are you of Hispanic or Latino origin or descent?

	GA-ADMD 2015	
	N	%
Yes, Hispanic or Latino	19	4.6%
No, Not Hispanic or Latino	394	95.4%
Total	413	100.0%
Not Answered	52	

Responses by Question

About You (continued)

Q56.1. What is your race? Response: White.

	GA-ADMD 2015	
	N	%
Yes	209	47.9%
No	227	52.1%
Total	436	100.0%
Not Answered	29	

Q56.2. What is your race? Response: Black or African-American.

	GA-ADMD 2015	
	N	%
Yes	204	46.8%
No	232	53.2%
Total	436	100.0%
Not Answered	29	

Q56.3. What is your race? Response: Asian.

	GA-ADMD 2015	
	N	%
Yes	11	2.5%
No	425	97.5%
Total	436	100.0%
Not Answered	29	

Q56.4. What is your race? Response: Native Hawaiian or other Pacific Islander.

	GA-ADMD 2015	
	N	%
Yes	1	0.2%
No	435	99.8%
Total	436	100.0%
Not Answered	29	

Q56.5. What is your race? Response: American Indian or Alaska Native.

	GA-ADMD 2015	
	N	%
Yes	11	2.5%
No	425	97.5%
Total	436	100.0%
Not Answered	29	

Responses by Question

About You (continued)

Q56.6. What is your race? Response: Other.

	GA-ADMD 2015	
	N	%
Yes	10	2.3%
No	426	97.7%
Total	436	100.0%
Not Answered	29	

Q57. Did someone help you complete this survey?

	GA-ADMD 2015	
	N	%
Yes	107	29.8%
No	252	70.2%
Total	359	100.0%
Not Answered	16	

Q58.1. How did that person help you? Response: Read the questions to me.

	GA-ADMD 2015	
	N	%
Yes	52	49.1%
No	54	50.9%
Total	106	100.0%
Not Answered	17	

Q58.2. How did that person help you? Response: Wrote down the answers I gave.

	GA-ADMD 2015	
	N	%
Yes	36	34.0%
No	70	66.0%
Total	106	100.0%
Not Answered	17	

Q58.3. How did that person help you? Response: Answered the questions for me.

	GA-ADMD 2015	
	N	%
Yes	37	34.9%
No	69	65.1%
Total	106	100.0%
Not Answered	17	

Responses by Question

About You (continued)

Q58.4. How did that person help you? Response: Translated the questions into my language.

	GA-ADMD 2015	
	N	%
Yes	8	7.5%
No	98	92.5%
Total	106	100.0%
Not Answered	17	

Q58.5. How did that person help you? Response: Helped in some other way.

	GA-ADMD 2015	
	N	%
Yes	9	8.5%
No	97	91.5%
Total	106	100.0%
Not Answered	17	



Your privacy is protected. The research staff will not share your personal information with anyone without your OK. Personally identifiable information will not be made public and will only be released in accordance with Federal laws and regulations.

You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the cover of this survey. This number is ONLY used to let us know if you returned the survey so we don't have to send you reminders.

If you want to know more about this study, please call 1-877-455-7161.

SURVEY INSTRUCTIONS

- Please be sure to fill the response circle completely. Use only black or blue ink or dark pencil to complete the survey.

Correct Mark ●

Incorrect Marks



- You are sometimes told to skip over some questions in the survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

- Yes → Go to Question 1
- No

↓ START HERE ↓

1. Our records show that you are now in the Georgia Medicaid Program. Is that right?

- Yes → Go to Question 3
- No

2. What is the name of your health plan? (Please print)



YOUR HEALTH CARE IN THE LAST 6 MONTHS

These questions ask about your own health care. Do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.

3. In the last 6 months, did you have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?

Yes
 No → *Go to Question 5*

4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?

Never
 Sometimes
 Usually
 Always

5. In the last 6 months, did you make any appointments for a check-up or routine care at a doctor's office or clinic?

Yes
 No → *Go to Question 7*

6. In the last 6 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?

Never
 Sometimes
 Usually
 Always

7. In the last 6 months, not counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

None → *Go to Question 15*
 1 time
 2
 3
 4
 5 to 9
 10 or more times

8. In the last 6 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

Yes
 No

9. In the last 6 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

Yes
 No → *Go to Question 13*

10. Did you and a doctor or other health provider talk about the reasons you might want to take a medicine?

Yes
 No

11. Did you and a doctor or other health provider talk about the reasons you might not want to take a medicine?

Yes
 No

12. When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?

Yes
 No

13. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

0 1 2 3 4 5 6 7 8 9 10
Worst Best
Health Care Health Care
Possible Possible

14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?

- Never
- Sometimes
- Usually
- Always

17. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

18. In the last 6 months, how often did your personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

19. In the last 6 months, how often did your personal doctor show respect for what you had to say?

- Never
- Sometimes
- Usually
- Always

20. In the last 6 months, how often did your personal doctor spend enough time with you?

- Never
- Sometimes
- Usually
- Always

21. In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

- Yes
- No → Go to Question 23

YOUR PERSONAL DOCTOR

15. A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

- Yes
- No → Go to Question 24

16. In the last 6 months, how many times did you visit your personal doctor to get care for yourself?

- None → Go to Question 23
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times



22. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

- Never
- Sometimes
- Usually
- Always

23. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Personal Doctor Personal Doctor Best
Possible Possible

GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, do not include dental visits or care you got when you stayed overnight in a hospital.

24. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments to see a specialist?

- Yes
- No → *Go to Question 28*

25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?

- Never
- Sometimes
- Usually
- Always

26. How many specialists have you seen in the last 6 months?

- None → *Go to Question 28*
- 1 specialist
- 2
- 3
- 4
- 5 or more specialists

27. We want to know your rating of the specialist you saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Specialist Personal Doctor Best Specialist
Possible Possible

YOUR HEALTH PLAN

The next questions ask about your experience with your health plan.

28. In the last 6 months, did you look for any information in written materials or on the Internet about how your health plan works?

- Yes
- No → *Go to Question 30*

29. In the last 6 months, how often did the written materials or the Internet provide the information you needed about how your health plan works?

- Never
- Sometimes
- Usually
- Always

30. In the last 6 months, did you get information or help from your health plan's customer service?

- Yes
- No → **Go to Question 33**

31. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?

- Never
- Sometimes
- Usually
- Always

32. In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

- Never
- Sometimes
- Usually
- Always

33. In the last 6 months, did your health plan give you any forms to fill out?

- Yes
- No → **Go to Question 35**

34. In the last 6 months, how often were the forms from your health plan easy to fill out?

- Never
- Sometimes
- Usually
- Always

35. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Best
Health Plan Health Plan
Possible Possible

ABOUT YOU

36. In general, how would you rate your overall health?

- Excellent
- Very Good
- Good
- Fair
- Poor

37. In general, how would you rate your overall mental or emotional health?

- Excellent
- Very Good
- Good
- Fair
- Poor

38. Have you had either a flu shot or flu spray in the nose since July 1, 2014?

- Yes
- No
- Don't know

39. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?

- Every day
- Some days
- Not at all → **Go to Question 43**
- Don't know → **Go to Question 43**



40. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

- Never
- Sometimes
- Usually
- Always

41. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.

- Never
- Sometimes
- Usually
- Always

42. In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.

- Never
- Sometimes
- Usually
- Always

43. Do you take aspirin daily or every other day?

- Yes
- No
- Don't know

44. Do you have a health problem or take medication that makes taking aspirin unsafe for you?

- Yes
- No
- Don't know

45. Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?

- Yes
- No

46. Are you aware that you have any of the following conditions? Mark one or more.

- High cholesterol
- High blood pressure
- Parent or sibling with heart attack before the age of 60

47. Has a doctor ever told you that you have any of the following conditions? Mark one or more.

- A heart attack
- Angina or coronary heart disease
- A stroke
- Any kind of diabetes or high blood sugar

48. In the last 6 months, did you get health care 3 or more times for the same condition or problem?

- Yes
- No → *Go to Question 50*

49. Is this a condition or problem that has lasted for at least 3 months? Do not include pregnancy or menopause.

- Yes
- No



◆

50. Do you now need or take medicine prescribed by a doctor? Do not include birth control.

- Yes
- No → **Go to Question 52**

51. Is this medicine to treat a condition that has lasted for at least 3 months? Do not include pregnancy or menopause.

- Yes
- No

52. What is your age?

- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

53. Are you male or female?

- Male
- Female

54. What is the highest grade or level of school that you have completed?

- 8th grade or less
- Some high school, but did not graduate
- High school graduate or GED
- Some college or 2-year degree
- 4-year college graduate
- More than 4-year college degree

55. Are you of Hispanic or Latino origin or descent?

- Yes, Hispanic or Latino
- No, Not Hispanic or Latino

◆

56. What is your race? Mark one or more.

- White
- Black or African-American
- Asian
- Native Hawaiian or other Pacific Islander
- American Indian or Alaska Native
- Other

57. Did someone help you complete this survey?

- Yes → **Go to Question 58**
- No → **Thank you. Please return the completed survey in the postage-paid envelope.**

58. How did that person help you? Mark one or more.

- Read the questions to me
- Wrote down the answers I gave
- Answered the questions for me
- Translated the questions into my language
- Helped in some other way

Thanks again for taking the time to complete this survey! Your answers are greatly appreciated.

When you are done, please use the enclosed prepaid envelope to mail the survey to:

DataStat, 3975 Research Park Drive, Ann Arbor, MI 48108



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CVYAE